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## **Application Data Sheet**

### **Application Information**

Application number::	10/715,969
Filing Date::	11/18/03
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	3738
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	INTERVERTEBRAL SPACER DEVICE HAVING ARCH SHAPED SPRING ELEMENTS
Attorney Docket Number::	SPINE 3.0-446 CONT
Request for Early Publication?::	No
Request for Non-Publication?::	No
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	James
Middle Name::	D.
Family Name::	Ralph
City of Residence::	Seaside Park
State or Province of Residence::	NJ
Country of Residence::	US
Street of mailing address::	P.O. Box 99

City of mailing address:: Seaside Park  
State or Province of mailing address:: NJ  
Postal or Zip Code of mailing address:: 08752

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Stephen  
Family Name:: Tatar  
City of Residence:: ~~Montvale~~ Montville  
State or Province of Residence:: NJ  
Country of Residence:: US  
Street of mailing address:: 45 Upper Mountain Avenue  
City of mailing address:: ~~Montvale~~ Montville  
State or Province of mailing address:: NJ  
Postal or Zip Code of mailing address:: 07045

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Joseph  
Middle Name:: P.  
Family Name:: Errico  
City of Residence:: Green Brook  
State or Province of Residence:: NJ  
Country of Residence:: US  
Street of mailing address:: 29 Deer Path Circle  
City of mailing address:: Green Brook  
State or Province of mailing address:: NJ  
Postal or Zip Code of mailing address:: 08812

**Correspondence Information**

Correspondence Customer Number:: 000530

**Representative Information**

Representative Customer Number:: 51640

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/982,148	10/18/01

**Foreign Priority Information**

**Assignee Information**

Assignee name:: SpineCore, Inc.  
Street of mailing address:: 475 Springfield Ave  
4th Floor  
City of mailing address:: Summit  
State or Province of mailing address:: NJ